

Psychiatric Services Fee Schedule*

Effective July 1, 2015 through June 30, 2016

Prior Authorization is required for all psychiatric care.

(ARNPs are paid up to 90% of the fee schedule)

Procedure Code	Service Procedure Description	Non-Facility Fee Schedule Limit	Facility Fee Schedule Limit
90791	Psych Diagnostic Exam Report Required	\$220.13	\$213.53
90792	Psych Diagnostic Exam with Medical Service; Report Required	\$246.52	\$239.32
90785	Psychiatry treatment; complex interactive	\$23.99	\$23.99
90832	Psychotherapy, 30 minutes with patient and/or family member	\$107.36	\$106.16
90833	Psychotherapy, 30 minutes with patient and/or family member with E/M visit	\$110.36	\$109.16
90834	Psychotherapy, 45 minutes, with patient and/or family member	\$142.15	\$140.95
90836	Psychotherapy, 45 minutes with patient and/or family member with E/M visit	\$139.75	\$139.15
90837	Psychotherapy, 60 minutes with patient and/or family member	\$213.53	\$212.33
90838	Psychotherapy, 60 minutes with patient and/or family member with E/M visit	\$184.74	\$182.94
90839	Psychotherapy, Crisis first 60 minutes	\$223.13	\$221.33
90840	Psychotherapy, Crisis add-on code; each additional 30 minutes	\$106.76	\$106.16
90847	Psychotherapy, Family	\$179.34	\$177.54
90853	Psychotherapy, Group	\$43.19	\$42.59
90863	Psych Pharmocological Management (use E&M code for medication mg.)	Not covered	Not covered
90865	Narcosynthesis	\$287.90	\$215.93
90882	Enviromental Intervention for Medical Management	\$75.18	\$75.18
90885	Psych Evaluation of Records	Bundled	Bundled
90887	Interpretation of Results of Medical-Psych Testing	Bundled	Bundled
90889	Preparation of Report of Patient's Psych	Bundled	Bundled
90899	Unlisted Psychiatric Services	By Report	By Report
96101	Psychometric Testing, per Hour, Both Face to Face	\$134.36	\$133.16
96102	Psychometric Testing with Qualified Health Care Professional	\$110.96	\$38.99
96110	Developmental Testing, Limited	\$16.79	\$16.79
96111	Developmental Testing, Extended	\$217.13	\$205.13
96116	Neurobehavioral Status Exam, per Hour, Both Face to Face	\$157.15	\$146.35
96118	Neuropsych Testing, per Hour, Both Face to Face	\$166.14	\$132.56
96119	Neuropsych Testing with Qualified Health Care Professional	\$142.15	\$40.19

^{*} This handout is not all-inclusive and does not replace L&I's Medical Aid Rules and Fee Schedule (MARFS).

For complete and current descriptions, limits, and policies, refer to the MARFS online at www.Lni.wa.gov/FeeSchedules.

www.Lni.wa.gov/Psych

L&I Resources for Psychiatrists, Psychologists and Psychiatric ARNPs

Instructions for getting prior authorization — required for all psychiatric services.

For workers covered by L&I (State fund)

Complete the preauthorization form available on this page. Note: For an initial mental health evaluation, if the diagnosis has not yet been established, you can leave the form's *Diagnosis Description* and *Causal Relationship* fields blank.

Or, contact the claim manager:

- By phone: To get the claims manager's phone number, call the Claim Information line at 1-800-831-5227.
- By secure email: If you are the attending physician, IME, or concurrent care provider, log into the Claim & Account Center (CAC) at https://secure.Lni.wa.gov.

Coverage and treatment information

- Link to an L&I guideline that describes how to work with L&I when treating psychiatric conditions.
- Note: L&I **does not cover** psychiatric evaluation and treatment services provided by social workers and other master's level counselors, even when services are delivered under the direct supervision of a clinical psychologist or a psychiatrist.

Billing and payment policies

- Get two prior years of the *Psychiatric Quick Reference Fee Schedule*.
- Link to the complete *Billing and Payment Policies for Psychiatric and Psychological Services*.

Related rules

■ Link to the Psychiatric Services rule, Washington Administrative Code (WAC) 296-21-270.

For workers employed by self-insured companies

Contact the employer. On this page, you can connect to lists of self-insured employers.